

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 / 21

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Eye of the Tiger Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Andy Barr For Congress, Inc.

Mailing Address PO Box 2059

City
LexingtonState
KYZip Code
40588-2059Purpose of Disbursement
Committee ContributionCandidate Name
Garland "Andy" Barr011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: KY District: 06

Transaction ID: SB23-155-132-e

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	1	0

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Bass Victory Committee

Mailing Address PO Box 3451

City
ConcordState
NHZip Code
03302-3451Purpose of Disbursement
Committee ContributionCandidate Name
Charles F. Bass011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

State: NH District: 02

Special

Transaction ID: SB23-213-165-e

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	0

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Benishek For Congress

Mailing Address 802 Pentoga Trail

City
Crystal FallsState
MIZip Code
49920-8518Purpose of Disbursement
Committee ContributionCandidate Name
Daniel J Benishek011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 01

Transaction ID: SB23-215-152-e

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	1	0

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)